## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10748584

CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN		
			(Column 1)		(Column 2)		1	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			17					RATE	FEE		RATE	FEE .
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			17 minus 20=		٠ ڪ			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			L mi	nus 3 =	ئ			X43=		OR	X86=	
MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT					+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" i					"0" in c	olumn 2	ı	TOTAL		OR	TOTAL	MU
CLAIMS AS AMENDED - PART II								·		•	OTHER	THAN
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	] [	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)		DDIT. FEE			ADDII. I ELI	
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
IDME	Total	*	Minus	**	•.	=	1	X\$ 9=		OR	X\$18=	,
<b>AMENDMENT</b>	Ind pendent	*	Minus	***		=	]	X43=		OR	X86=	
_	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		┚┢	. 1 45			. 200-	
							L	+145= TOTAL		OR	+290= TOTAL	•
							Α	DDIT. FEE		OR	ADDIT FEE	
		(Column 1)		(Colun		(Column 3)	•	•				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	] [	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		<u> </u>	$I\Gamma$	X43=		OR	X86=	
	FIRST PRESE	NTATION OF ML	JLTIPLE DEF	ENDENT	CLAIM		J	+145=			+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+29U=	
**	f the "Highest Nu	mber Previously Pa mber Previously Pa	id For IN THIS	S SPACE is	less than	n 20, enter *20.	." AI	DDIT. FEE		OR ,	ADDIT. FEE	
		ber Previously Paid					er foun	d in the app	ropriate box	in col	umn 1.	